	Application of Docket Number
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000	450100 -
	1 /9 / 00 00 01

450100-038.0

CLAIMS AS FILED - PART I (Column 1)			=	(Column 2) SMALL ENTITY		NTITY	7 OR	OTHER THAN SMALL ENTITY				
TOTAL CLAIMS			5					RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TO	TAL CHARGEA	IBLE CLAIMS	5 minus 20= *					X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	minus 3 =			1		X40=		OR	X80=	80
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	790
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR:	OTHER SMALL		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	(EST IBER OUSLY	PRESENT EXTRA		RAŢE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•]	Minus	- ع	U	= .		X\$ 9≈		OR	X\$18=	
AME	Independent	NTATION OF M	Minus	PENDEN	4 CLAIM	= \	X40=	X40=	ż	OR	X80=	
<u> </u>	FINOT PRECE	MATONO	JLISPEL DEF	ENULIV	· ·		J.	+135=		OR	+270=	
	ital n	1. 3. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	81210	(Column 1)		(Column 2) (Column 3)						· · · :		era ĝe
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	• 1	Minus	**	20	=		X\$ 9=		OR	X\$18≐	
AME	Independent	• 4	Minus	***	4	= -		X40 ¹ 3		OR	X89 ≦6	
لينا	PHSI PHESE	NTATION OF MU	JUHPLE DEF	ENGENI	CLAIM		1	+135=		OR	+270=	
••)	TOTAL ADDIT. FEE		or	TÖTAL ADDIT. FEE	eta j
		(Column 1)	•	(Colur		(Column 3)				<i>.</i> .		
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Totai `	•	Minus	••		2		X\$ 9=		OR	X\$18=	ï
¥.	Independent	•	Minus	***		=		X40=	···	ı	X80=	· 1 :-
	FIRST PRESE	NTATION OF MI	JETIPLE DEP	ENDENT	CLAIM		╽┟			OR		
• 1	f the enter in colu	me t is loca than th	+135=		OR	+270=						
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE												
		mber Previously Pa her Previously Pai					er four	nd in the apo	moriate box	in col	umn 1	